

CONS

Docket No.: ASC-012DV (058420/157307)

(PATENT)

#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE LETTERS PATENT OF: Lee et al.

CONF. NO.: 6105

PATENT NO. 7,141,820 B2

GROUP NO.: 2813

ISSUE DATE: November 28, 2006

EXAMINER: Nguyen, Tuan H.

TITLE: STRUCTURES WITH PLANAR STRAINED LAYERS

# REQUEST FOR CERTIFICATE OF CORRECTION UNDER 37 CFR 1.323

Certificate of Correction Branch Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Certificate

JAN 2 4 2007

of Correction

Dear Sir:

Upon reviewing the above-identified patent, Patentee noted an error on the cover page in item (73) Assignee.

Please correct the following error in item (73) Assignee as follows:

Delete "AmberWave Systems Corporation, Salem, NH (US)" and replace with:

-- Massachusetts Institute of Technology, Cambridge, MA (US) --

The error now sought to be corrected is an error which occurred upon completion of Form PTOL-85 and does not involve new matter or require reexamination. Massachusetts Institute of Technology is the Assignee of this patent; the assignment is recorded at Reel 05187, Frame 0669.

01/23/2007 MGEBREM1 00000004 7141820 01 FC:1811 160.60 CP

IJAN 2 5 2007

Patent No.: 7,141,820 B2 Docket No.: ASC-012DV

A check for \$100.00 for the fee is enclosed. Patentee believes that no other fees are necessitated by the filing of this Certificate of Correction. However, if any other fee is due, please charge said fee to our Deposit Account No. 07-1700.

Transmitted herewith is a proposed Certificate of Correction effecting such amendment.

Patentee respectfully solicits the granting of the requested Certificate of Correction.

Dated: January 17, 2007

Respectfully submitted,

By not its

Natasha C. Us

Attorney for Applicants Registration No.: 44,381 GOODWIN PROCTER LLP

Exchange Place

Boston, Massachusetts 02109

(617) 570-1806

## UNITED STATES PATENT AND TRADEMARK OFFICE CERTIFICATE OF CORRECTION

Page 1 of 1

PATENT NO.

7,141,820 B2

APPLICATION NO.:

10/788,741

ISSUE DATE

November 28, 2006

INVENTOR(S) :

Lee et al.

It is certified that an error appears or errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

On the cover page in item (73) Assignee, delete "AmberWave Systems Corporation, Salem, NH (US)" and replace with:

-- Massachusetts Institute of Technology, Cambridge, MA (US)--

MAILING ADDRESS OF SENDER:

LIBC/2909478

Patent Administrator Goodwin Procter LLP

Exchange Place
Boston, MA 02109
Tel. No.: (617) 570-1000
Customer No. 051414

PATENT NO.: 7,141,820 B2



#### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE LETTERS

PATENT OF:

Lee et al.

CONF. NO.:

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PATENT NUMBER:

7,141,820 B2

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2813

**ISSUE DATE:** 

November 28, 2006 EXAMINER:

Nguyen, Tuan H.

TITLE:

STRUCTURES WITH PLANAR STRAINED LAYERS

### CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Certificate of Corrections Branch, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 17th day of January, 2007,

Certificate of Corrections Branch Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

#### Submitted herewith is/are:

- Transmittal Form (1 page); 1.
- 2. Fee Transmittal (1 page);
- 3. Request for Certificate of Correction Under 37 C.F.R. 1.323 (2 pages);
- Certificate of Correction (1 page); 4.
- Check in the amount of \$100.00; and 5.
- Return Receipt Postcard. 6.

PTO/SB/21 (09-06)
Approved for use through 03/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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### **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7,141,820 B2 Issue Date November 28, 2006 First Named Inventor Lee Art Unit 2813 **Examiner Name** Nguyen, Tuan H. Attorney Docket Number ASC-012DV

|   | · · · · · · · · · · · · · · · · · · · |  |          |   |  |  |  |  |  |  |  |
|---|---------------------------------------|--|----------|---|--|--|--|--|--|--|--|
| ENCLOSURES (Check all that apply)                             |                                       |  |          |   |  |  |  |  |  |  |  |
| X Fee Transm  | nittal Form                           | Drawing(s)   |          | After Allowance Communication to TC   |  |  |  |  |  |  |  |
| X Fee A   | Attached                              | Licensing-related Papers                               |          | Appeal Communication to Board of Appeals and Interferences  |  |  |  |  |  |  |  |
| Amendment/Reply   |                                       | Petition   |          | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  |  |  |  |  |  |  |  |
| After Final   |                                       | Petition to Convert to a<br>Provisional Application    |          | Proprietary Information   |  |  |  |  |  |  |  |
| Affidavits/declaration(s)                                     |                                       | Power of Attorney, Revocat<br>Change of Correspondence |          | Status Letter  X Other Enclosure(s) (please Identify below):  |  |  |  |  |  |  |  |
| Extension of Time Request                                     |                                       | Terminal Disclaimer                                    |          |   |  |  |  |  |  |  |  |
| Express Abandonment Request  Information Disclosure Statement |                                       | Request for Refund  CD, Number of CD(s)                |          | <ul> <li>Request for Certificate of<br/>Correction Under 37 CFR<br/>1.323</li> <li>Certificate of Correction</li> </ul> |  |  |  |  |  |  |  |
| Certified Copy of Priority<br>Document(s)                     |                                       | Landscape Table on CD                                  |          | <ul> <li>Return receipt postcard</li> <li>Certificate of First Class<br/>Mailing</li> </ul>                             |  |  |  |  |  |  |  |
| Reply to Missing Parts/ Incomplete Application                |                                       | Remarks  |          |   |  |  |  |  |  |  |  |
| Reply to Missing Parts under 37 CFR 1.52 or 1.53              |                                       |  |          |   |  |  |  |  |  |  |  |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT                    |                                       |  |          |   |  |  |  |  |  |  |  |
| Firm Name   | GOODWIN PROCTER LLP                   |  |          |   |  |  |  |  |  |  |  |
| Signature   | nto                                   | (.6  |          |   |  |  |  |  |  |  |  |
| Printed name  | Natasha C. Us                         |  |          |   |  |  |  |  |  |  |  |
| Date  | January 17, 2007                      |  | Reg. No. | 44,381  |  |  |  |  |  |  |  |

PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032

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| O) Under the Pa   | · · · · · · · · · · · · · · · · · · ·    | 1 1995, no person are                  | required to            | respond to a collection  | n of informatio                          | n unless it displays | s a valid OME        | 3 control number |  |
|---|--|--|------------------------|--|--|----------------------|----------------------|------------------|--|
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2006 |  |  |                        | Complete if Known  |  |                      |                      |                  |  |
|   |  |  |                        |  |  | 7,141,820 B2         |                      |                  |  |
|   |  |  |                        |  |  | ovember 28, 2006     |                      |                  |  |
|   |  |  |                        |  |  | Lee                  |                      |                  |  |
|   |  |  |                        |  |  | Nguyen, Tuan H.      |                      |                  |  |
| Applicant claims small entity status. See 37 CFR 1.27   |  |  |                        | Art Unit 2813  |  |                      |                      |                  |  |
| TOTAL AMOUNT OF PAYMENT (\$) 100.00   |  |  |                        | Attorney Docket No. ASC-012DV                                    |  |                      |                      |                  |  |
| METHOD OF   | PAYMENT (check                           | call that apply)                       |                        |  |  |                      |                      |                  |  |
| x Check   | Credit Card                              | Money Order                            | No                     | ne Other (   | please identi                            | fy):                 |                      |                  |  |
| Deposit Ac  | count Deposit Account                    | Number: 07-1700                        | Deposit Acc            | count Name:  | Go                                       | odwin Procte         | r LLP                |                  |  |
| For the   | above-identified dep                     | oosit account, the                     | Director is            | hereby authorize   | ed to: (checi                            | call that apply)     |                      |                  |  |
| c   | harge fee(s) indicate                    | ed below                               |                        | Charg  | e fee(s) indi                            | cated below, e       | xcept for t          | the filing fee   |  |
|   | harge any additional                     |  | ayment of              | x Credit   | any overpa                               | yments               |                      |                  |  |
| FEE CALCUI  | e(s) under 37 CFR                        | 1.10 and 1.17                          |                        |  | ·  | <del> </del>         |                      | <del></del>      |  |
| <b></b>   | G, SEARCH, AND E                         | XAMINATION F                           | EES                    |  |  |                      |                      |                  |  |
|   | •  | ILING FEES                             |                        | ARCH FEES  | EXAMIN                                   | ATION FEES           |                      |                  |  |
| Application T   | ype Fee (                                | Small Entity  \$) Fee (\$)             | Fee (\$                | Small Entity   | Fee (\$)                                 | Small Entity         | Eass                 | Daid (\$)        |  |
| Utility   | 300                                      |  | 500                    | ) <u>Fee (\$)</u><br>250   | 200                                      | Fee (\$)<br>100      | rees                 | Paid (\$)        |  |
| Design  | 200                                      |  | 100                    | 50   | 130                                      | 65                   |                      |                  |  |
| Plant   | 200                                      |  | 300                    | 150  | 160                                      | 80                   |                      |                  |  |
| Reissue   | 300                                      | 150                                    | 500                    | 250  | 600                                      | 300                  |                      |                  |  |
| Provisional   | 200                                      | 100                                    | 0                      | 0  | 0  | 0                    |                      |                  |  |
| 2. EXCESS CL  | AIM FEES                                 |  |                        |  |  |                      |                      | Small Entity     |  |
| Fee Description   |  |  |                        |  |  |                      | Fee (\$)             | Fee (\$)         |  |
| Each claim over 20 (including Reissues)   |  |  |                        |  |  |                      | 50                   | 25               |  |
|   | ent claim over 3 (inc                    | luding Reissues)                       |                        |  |  |                      | 200                  | 100              |  |
| Multiple depend   |  | F. (A)                                 | <b></b>                | 5-1-1-(6)  |  |                      | 360                  | 180              |  |
| Total Claims  | Extra Claims                             | Fee (\$)                               | Fee I                  | Paid (\$)  | <u>Multiple Depen</u><br><u>Fee (\$)</u> |                      | <u>Fee Paid (\$)</u> |                  |  |
| HP = highest num  | ber of total claims paid fo              | or, if greater than 20.                |                        |  | Fee                                      | 1731                 | ree raid (           | <u>51</u>        |  |
| Indep. Claims   | Extra Claims                             | Fee (\$)                               | Fee I                  | Paid (\$)  |  |                      |                      |                  |  |
|   | -=                                       | × =                                    |                        |  |  |                      |                      |                  |  |
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| 3. APPLICATIO   |  | 1100 1                                 | •                      |  |  | ·                    |                      |                  |  |
| listings und  | ation and drawings eler 37 CFR 1.52(e)), | exceed 100 sneets<br>the application s | ot paper<br>ize fee du | (excluding electr  | onically file<br>for small en            | ed sequence or       | computer             | in.              |  |
| sheets or fr  | action thereof. See                      | 35 U.S.C. 41(a)(                       | l)(G) and              | 37 CFR 1.16(s).  | or billari cir                           | irty) for each a     | aditional 5          | .0               |  |
| <u>Total Sheet</u>  |  |  |                        | dditional 50 or frac   | tion thereof                             | Fee (\$)             | Fee                  | Paid (\$)        |  |
|   | 100 =                                    | /50                                    |                        | (round up to a who   | ole number) x                            |                      | =                    |                  |  |
| 4. OTHER FEE(S) Fees Paid (\$)  |  |  |                        |  |  |                      |                      |                  |  |
| Non-English Specification, \$130 fee (no small entity discount)                                       |  |  |                        |  |  |                      |                      |                  |  |
| Other (e.g., late filing surcharge): Certificate of correction 100.00                                 |  |  |                        |  |  |                      |                      |                  |  |
| SUBMITTED BY  |  |  |                        | 5  |  | ,                    |                      |                  |  |
| Signature   | 1 h                                      |  |                        | Registration No. Attorney/Agent) 44,381 Telephone (617) 570-1806 |  |                      | <b>70-1806</b>       |                  |  |
| Name (Print/Type)   | De) Natasha C. Us Date January 1         |  |                        |  |  |                      | 17, 2007             |                  |  |